

POSITION	INITIALS	ID N	DATE
FEE DETERMINATION	J.B.	712005	2-21-99
O.I.P.E. CLASSIFIER		16	72299
FORMALITY REVIEW	OMC	609169	4-26-00

INDEX OF CLAIMS

✓ Rejected
 " Allowed
 (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

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Claim	Final	Original	Date
1	+	8/01	
2	+	9/02	
3	+	5/03	
4	+		
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Claim	Final	Original	Date
51	+	8/01	
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Claim	Final	Original	Date
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150	+		

If more than 150 claims or 10 additional sheets are used, staple additional sheet here

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